

29. Nov. 2004

PCT**REQUEST**

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only	
PCT/EP 2004 / 013535	
International Application No.	
29 NOV 2004	(29. 11. 04)
International Filing Date	
EUROPEAN PATENT OFFICE PCT INTERNATIONAL APPLICATION	
Name of receiving Office and "PCT International Application"	
Applicant's or agent's file reference (if desired) (12 characters maximum) 32043P WO	

Box No. I TITLE OF INVENTION	
Method for preventing and treating diabetes using DG119	
Box No. II APPLICANT <input type="checkbox"/> This person is also inventor	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	
DeveloGen Aktiengesellschaft für entwicklungsbiologische Forschung Rudolf-Wissell-Str. 28 37079 Göttingen DE	
Telephone No.	
Facsimile No.	
Teleprinter No.	
Applicant's registration No. with the Office	
State (that is, country) of nationality: DE	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	
AUSTEN Matthias Wachholderweg 24 37079 Göttingen DE	
This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
Applicant's registration No. with the Office	
State (that is, country) of nationality: DE	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)	
WEICKMANN & WEICKMANN Postfach 860 820 81635 München DE	
Telephone No. 089/455 63-0	
Facsimile No. 089/455 63-999	
Teleprinter No.	
Agent's registration No. with the Office	
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Sheet No. ... 2 ...

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)			
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>			
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> ONICHTCHOUK Daria Auf der Lieth 10 37077 Göttingen DE		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i> Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality: RU		State <i>(that is, country)</i> of residence: DE	
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> SIEGMUND Thomas Potzwenden 5 37136 Landolfshausen DE		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i> Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality: DE		State <i>(that is, country)</i> of residence: DE	
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> ADUROJA Kristin Heyestr. 10 40625 Düsseldorf DE		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i> Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality: DE		State <i>(that is, country)</i> of residence: DE	
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> RUDOLPH Bettina Lärchenstr. 13 30161 Hannover DE		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i> Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality: DE		State <i>(that is, country)</i> of residence: DE	
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.			

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)*If none of the following sub-boxes is used, this sheet should not be included in the request.*

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

HARDER Friedrich
Am Weissen Steine 8
37085 Göttingen
DE

This person is:

- ☐ applicant only
☒ applicant and inventor
☐ inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

DE

State (that is, country) of residence:

DE

This person is applicant for the purposes of:

☐ all designated States☐ all designated States except the United States of America☒ the United States of America only☐ the States indicated in the Supplemental Box

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☐ inventor only (If this check-box is marked, do not fill in below.)

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State (that is, country) of nationality:

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☐ all designated States☐ all designated States except the United States of America☐ the United States of America only☐ the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on another continuation sheet.

Supplemental Box

*If the Supplemental Box is not used, this sheet should not be included in the request.***"ADDITIONAL REPRESENTATIVES"**

Names

Dipl.-Ing.	Franz Albert Weickmann
Dipl.-Chem.	Bernhard Huber
Dr.-Ing.	Horst Liska
Dipl.-Phys. Dr.	Jörg Prechtel
Dipl.-Chem. Dr.	Brigitte Böhm
Dipl.-Chem. Dr.	Wolfgang Weiß
Dipl.-Phys. Dr.	Johannes Tiesmeyer
Dipl.-Phys. Dr.	Markus Herzog
Dipl.-Phys.	Bernhard Ruttensperger
Dipl.-Phys. Dr.-Ing.	Volker Jordan
Dipl.-Chem. Dr.	Michael Dey

Box No. VIII (iv) DECLARATION: INVENTORSHIP (only for the purposes of the designation of the United States of America)
The declaration must conform to the following standardized wording provided for in Section 214; see Notes to Boxes Nos. VIII, VIII (i) to (v) (in general) and the specific Notes to Box No. VIII (iv). If this Box is not used, this sheet should not be included in the request.

**Declaration of inventorship (Rules 4.17(iv) and 51bis.1(a)(iv))
 for the purposes of the designation of the United States of America:**

I hereby declare that I believe I am the original, first and sole (if only one inventor is listed below) or joint (if more than one inventor is listed below) inventor of the subject matter which is claimed and for which a patent is sought.

This declaration is directed to the international application of which it forms a part (if filing declaration with application).

This declaration is directed to international application No. PCT/..... (if furnishing declaration pursuant to Rule 26ter).

I hereby declare that my residence, mailing address, and citizenship are as stated next to my name.

I hereby state that I have reviewed and understand the contents of the above-identified international application, including the claims of said application. I have identified in the request of said application, in compliance with PCT Rule 4.10, any claim to foreign priority, and I have identified below, under the heading "Prior Applications," by application number, country or Member of the World Trade Organization, day, month and year of filing, any application for a patent or inventor's certificate filed in a country other than the United States of America, including any PCT international application designating at least one country other than the United States of America, having a filing date before that of the application on which foreign priority is claimed.

Prior Applications: EP 03 027 514.3 filed November 28, 2003

I hereby acknowledge the duty to disclose information that is known by me to be material to patentability as defined by 37 C.F.R. § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the PCT international filing date of the continuation-in-part application.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name: AUSTEN Matthias

Residence: Göttingen, Germany

(city and either US state, if applicable, or country)

Mailing Address: Wachholderweg 24, 37079 Göttingen, Germany

Citizenship: DE

Inventor's Signature:
 (if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

Date:
 (of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

Name: ONICHTCHOUK Daria

Residence: Göttingen, Germany

(city and either US state, if applicable, or country)

Mailing Address: Auf der Lieth 10., 37077 Göttingen, Germany

Citizenship: RU

Inventor's Signature:
 (if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

Date:
 (of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

☒ This declaration is continued on the following sheet, "Continuation of Box No. VIII (iv)".

Fortsetzungsblatt für Felder VIII (i) bis (v) **ERKLÄRUNG**

Falls der Platz in einem der Felder VIII (i) bis (v) nicht für alle Angaben ausreicht, insbesondere im Falle, daß mehr als zwei Erfinder in Feld Nr. VIII (iv) aufgeführt werden: schreiben Sie "Fortsetzung von Feld Nr. VIII ..." (geben Sie die Ziffer des Feldes an) und machen Sie die erforderlichen Angaben entsprechend der in dem Feld, in dem der Platz nicht ausreicht, vorgeschriebenen Art und Weise. Falls hinsichtlich zweier oder mehr Erklärungen der Platz nicht ausreicht, sollten Sie jeweils ein separates Fortsetzungsblatt für jede Erklärung einreichen. Wird dieses Fortsetzungsblatt nicht benutzt, so sollte es dem Antrag nicht beigelegt werden.

Name: **SIEGMUND Thomas**Wohnsitz: **Landolfshausen, Germany**
(Stadt und US-Staat, falls anwendbar, sonst Land)Postanschrift: **Potzwenden 5, 37136 Landolfshausen, Germany**Staatsangehörigkeit: **DE**

Unterschrift des Erfinders:
(falls nicht bereits das Antragsformular unterschrieben wird oder falls die Erklärung nach Einreichung der internationalen Anmeldung nach Regel 26ter berichtigt oder hinzugefügt wird. Die Unterschrift muß die des Erfinders sein, nicht die des Anwalts)

Datum:
(der Unterschrift, falls das Antragsformular nicht unterschrieben wird oder der Erklärung, die nach Regel 26ter nach Einreichung der internationalen Anmeldung berichtigt oder hinzugefügt wird)

Name: **ADUROJA Kristin**Wohnsitz: **Düsseldorf, Germany**
(Stadt und US-Staat, falls anwendbar, sonst Land)Postanschrift: **Heyestr. 10, 40625 Düsseldorf, Germany**Staatsangehörigkeit: **DE**

Unterschrift des Erfinders:
(falls nicht bereits das Antragsformular unterschrieben wird oder falls die Erklärung nach Einreichung der internationalen Anmeldung nach Regel 26ter berichtigt oder hinzugefügt wird. Die Unterschrift muß die des Erfinders sein, nicht die des Anwalts)

Datum:
(der Unterschrift, falls das Antragsformular nicht unterschrieben wird oder der Erklärung, die nach Regel 26ter nach Einreichung der internationalen Anmeldung berichtigt oder hinzugefügt wird)

Name: **RUDOLPH Bettina**Wohnsitz: **Hannover, Germany**
(Stadt und US-Staat, falls anwendbar, sonst Land)Postanschrift: **Lärchenstr. 13, 30161 Hannover, Germany**Staatsangehörigkeit: **German**

Unterschrift des Erfinders:
(falls nicht bereits das Antragsformular unterschrieben wird oder falls die Erklärung nach Einreichung der internationalen Anmeldung nach Regel 26ter berichtigt oder hinzugefügt wird. Die Unterschrift muß die des Erfinders sein, nicht die des Anwalts)

Datum:
(der Unterschrift, falls das Antragsformular nicht unterschrieben wird oder der Erklärung, die nach Regel 26ter nach Einreichung der internationalen Anmeldung berichtigt oder hinzugefügt wird)

Name: **HARDER Friedrich**Wohnsitz: **Göttingen, Germany**
(Stadt und US-Staat, falls anwendbar, sonst Land)Postanschrift: **Am Weissen Steine 8, 37085 Göttingen, Germany**Staatsangehörigkeit: **German**

Unterschrift des Erfinders:
(falls nicht bereits das Antragsformular unterschrieben wird oder falls die Erklärung nach Einreichung der internationalen Anmeldung nach Regel 26ter berichtigt oder hinzugefügt wird. Die Unterschrift muß die des Erfinders sein, nicht die des Anwalts)

Datum:
(der Unterschrift, falls das Antragsformular nicht unterschrieben wird oder der Erklärung, die nach Regel 26ter nach Einreichung der internationalen Anmeldung berichtigt oder hinzugefügt wird)

☐ Diese Erklärung wird auf dem folgenden Blatt fortgeführt, "Fortsetzungsblatt für Feld Nr. VIII (iv)".

Box No. IX CHECK LIST; LANGUAGE OF FILING

This international application contains:

(a) **in paper form**, the following number of sheets:

request (including declaration sheets) : 8
 description (excluding sequence listing and/or tables related thereto) : 40
 claims : 8
 abstract : 1
 drawings : 19

Sub-total number of sheets : 76

sequence listing :
 tables related thereto :

(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)

Total number of sheets : 76

(b) ☐ **only in computer readable form** (Section 801(a)(i))

(i) ☐ sequence listing
 (ii) ☐ tables related thereto

(c) ☐ **also in computer readable form** (Section 801(a)(ii))

(i) ☐ sequence listing
 (ii) ☐ tables related thereto

Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the

☐ sequence listing:☐ tables related thereto:

(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)

This international application is **accompanied by** the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):

Number of items

1. ☒ fee calculation sheet : 1
2. ☐ original separate power of attorney :
3. ☐ original general power of attorney :
4. ☐ copy of general power of attorney; reference number, if any:
5. ☐ statement explaining lack of signature :
6. ☐ priority document(s) identified in Box No. VI as item(s):
7. ☐ translation of international application into (language):
8. ☐ separate indications concerning deposited microorganism or other biological material :
9. ☐ sequence listing in computer readable form (indicate type and number of carriers)
 - (i) ☐ copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) :
 - (ii) ☐ (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter :
 - (iii) ☐ together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column :
10. ☐ tables in computer readable form related to sequence listing (indicate type and number of carriers)
 - (i) ☐ copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) :
 - (ii) ☐ (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) :
 - (iii) ☐ together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column :
11. ☐ other (specify):

Figure of the drawings which should accompany the abstract:

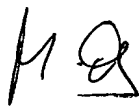
Language of filing of the international application:

english

Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

29. Nov. 2004



Dr. Michael Dey

For receiving Office use only

1. Date of actual receipt of the purported international application:

(29. 11. 04)

29 NOV 2004

3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:

4. Date of timely receipt of the required corrections under PCT Article 11(2):

5. International Searching Authority (if two or more are competent): ISA /

6. ☐ Transmittal of search copy delayed until search fee is paid

2. Drawings:

☒ received:☐ not received:

For International Bureau use only

Date of receipt of the record copy by the International Bureau: